## **Introduced by Assembly Member Galgiani**

February 17, 2011

An act to amend Section 14105.18 of the Welfare and Institutions Code, relating to health care.

## LEGISLATIVE COUNSEL'S DIGEST

AB 715, as introduced, Galgiani. Health care programs: provider reimbursement rates.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care benefits. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. Existing law also requires the department to administer various health programs, including the California Children's Services Program, Genetically Handicapped Person's Program, Breast and Cervical Cancer Early Detection Program, State-Only Family Planning Program, and Family Planning, Access, Care, and Treatment (Family PACT) Program. Existing law requires provider rates of payment for services under these programs to be identical to the rates of payment for the same service performed by the same provider type pursuant to the Medi-Cal program.

This bill would revise these provisions to, instead, require provider rates of payment for services under these programs to be identical to the rates of payment for the same service performed by the same provider type pursuant to the Medi-Cal program, except with regard to hospital inpatient rates of payment, which the bill would require to be 90% the of Medi-Cal hospital interim rates of payment, as prescribed.

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Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Section 14105.18 of the Welfare and Institutions Code is amended to read:

- 14105.18. (a) Notwithstanding any other provision of law, provider rates of payment for services rendered in all of the following programs shall be identical to the rates of payment for the same service performed by the same provider type pursuant to the Medi-Cal program, except that hospital inpatient rates of payment shall be 90 percent of the Medi-Cal hospital interim rates of payment, as developed by the department, and these hospital rates shall not be subject to any further reductions to Medi-Cal rates of payment in effect immediately before September 28, 2008 or enacted after that date.
- (1) The California Children's Services Program established pursuant to Article 5 (commencing with Section 123800) of Chapter 3 of Part 2 of Division 106 of the Health and Safety Code.
- (2) The Genetically Handicapped Person's Program established pursuant to Article 1 (commencing with Section 125125) of Chapter 2 of Part 5 of Division 106 of the Health and Safety Code.
- (3) The Breast and Cervical Cancer Early Detection Program established pursuant to Article 1.5 *I.3* (commencing with Section 104150) of Chapter 2 of Part 1 of Division 103 of the Health and Safety Code and the breast cancer programs specified in Section 30461.6 of the Revenue and Taxation Code.
- (4) The State-Only Family Planning Program established pursuant to Division 24 (commencing with Section 24000).
- (5) The Family Planning, Access, Care, and Treatment (Family PACT)—Waiver Program established pursuant to subdivision (aa) of Section 14132.
- (b) The director may identify in regulations other programs not listed in subdivision (a) in which providers shall be paid rates of payment that are identical to the rates of payments in the Medi-Cal program pursuant to subdivision (a).
- (c) Notwithstanding subdivision (a), services provided under any of the programs described in subdivisions (a) and (b) may be reimbursed at rates greater than the Medi-Cal rate that would

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- otherwise be applicable if those rates are adopted by the director
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- in regulations.

  (d) This section shall become operative on January 1, 2011.